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From: 4165951163



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DATE: September 27, 2010

TO:	FAX No.	PHONE No.
US Patent & Trademark Office	(F74) 272 B200	
Mail Stop: Amendment	(571) 273-8300	

Application No.: 10/561,430

Our File Ref:

7865-262 MIS:jb

From:

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Total Number of Pages (Including This Page): 23

COMMENTS:

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				Application Numb	ær	10/581.43	0		
TRANSMITTAL FORM		Filing Date February 8, 2007							
		First Named Inve	ntor	Martin Schweizer					
				Art Unit		1655			
4- 5 15			£5)	Examiner Name		Randall O	. Winston		
		pondence after initial	22	Attorney Docket I	Number	7865-262 MIS			
Total Number of	Pages in	This Submission [
			ENC	LOSURES (Check all t	hat apply	1)		Allowance Communication to TC
Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request R		Petition Petition to Convert to C	etition Petition to Convert to a Provisional Application over of Attorney, Revocation change of Correspondence Address reminal Disclaimer Pequest for Refund D. Number of CD(s)		Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):				
	Application Applic	ation Issing Parts CFR 1.52 or 1.53	TURE O	F APPLICANT,	ATTOR	NEY. O	R AGE	NT	
Firm Name				TAIT EIGANT,	A. 101	.,,,	T A OL		
	Sim & N	AcBurney							
Signature Lule Stimm									
Printed name Michael I. Stewart									
Date	Septem	ber 27, 2010			Re	eg. No.	24,973		
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Effective on 12/08/2004.			Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nur	nber	10/561,430			
FEE TRANSMITTAL For FY 2009			Filing Date	February 8, 2007		7		
			First Named In	ventor	Martin Schweize	er		
Applicant claims ampli antibus	Examiner Nami	е	Randall O. Wins	ton				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1655				
TOTAL AMOUNT OF PAYMENT	.00	Attorney Docke	ł No.	7865-262 MIS				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card	Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Ac	count Number: 192	253	Deposit A	ccount N:	me: Sim & McB	urney		
For the above-identified dep	osit account, the D	irector is her	eby authorized to	: (chećk	all that apply)			
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Charge any additions		yments of fe	e(s) Credi	t any ov	erpayments			
warning: under 37 CFR 1.16 a Warning: Information on this form m Information and authorization on PTO	ay become public. C	redit card Infi	ormation should n	ot be inc	luded on this form. F	Provide credit card		
FEE CALCULATION				,				
1. BASIC FILING, SEARCH, A		ON FEES						
FiLi	NG FEES Small Entity	SEAR	CH FEES Small Entity	EXAN	MINATION FEES Small Entity			
Application Type Fee	\$) Fee (\$)	Fee (\$)	Fee (\$)	Fee		Fees Paid (\$)		
Utility 330	200	540	270	220	110			
Design 220	,,,	100	50	140	70	· · · · · · · · · · · · · · · · · · ·		
Plant 220		330	165	170	85			
Reissue 330		540	270	650	325			
Provisional 220	110	0	0	C	0			
2. EXCESS CLAIM FEES Fee Description					Fee (\$)	Small Entity Fee (\$)		
Each claim over 20 (includir					52	26		
Each independent claim ove	r 3 (including Re	issues)			220	110		
Multiple dependent claims 195 <u>Total Claims</u> Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims								
20 or HP = x = Fee (\$) Fee Paid (\$)								
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
-3 or HP = x =								
HP = highest number of independent claims paid for, if greater than 3, 3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entiry) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 c (round up to a whole number) x								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
	Other (e.g., late filing surcharge): Extra Claim Fee (52.00) and Terminal Disclaimer (140.00) 192.00							

SUBMITTED BY				
Signature	Les	Stern	Registration No. (Attorney/Agent) 24,973	Telephone 416-849-8400
Name (Print/Type	e) Michael I. Stewart			Date September 27, 2010

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